

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	70811	10/14
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	165	10/20
FORMALITY REVIEW	C. J. C.	JCS30	11-14-00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)... Canceled A Appeal
 ÷ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	9/14/05
2	✓	✓	9/14/05
3	✓	✓	9/14/05
4	✓	✓	9/14/05
5	✓	✓	9/14/05
6	✓	✓	9/14/05
7	✓	✓	9/14/05
8	✓	✓	9/14/05
9	✓	✓	9/14/05
10	✓	✓	9/14/05
11	✓	✓	9/14/05
12	✓	✓	9/14/05
13	✓	✓	9/14/05
14	✓	✓	9/14/05
15	✓	✓	9/14/05
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If more than 150 claims or 10 actions
staple additional sheet here

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